# KAREN HANDEL Secretary of State

#### OFFICE OF SECRETARY OF STATE

Corporations Division
315 West Tower, #2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334
404-656-2817
www.georgiacorporations.org

CHAUNCEY R. NEWSOME Director

### APPLICATION FOR REGISTRATION OF PRIVATE CHILD-SUPPORT COLLECTION AGENCY

Personally appeared before me the undersigned being duly sworn according to law, and swears to the facts contained in this application. Pursuant to Georgia Code Section (O.C.G.A.)10-1-393.9 -10, the undersigned hereby registers with the Office of Secretary of State as a provider of private child-support collection services in the State of Georgia:

2. The principal place of business for the applicant is:	
529 South Second Street	
Elkhart, Indiana 46516	
3. The contact person's information is as follows:	SECRETATIONS DIVISIO
Name: David Conder	<u> </u>
Title: President	SNO
Office Phone: (574) 296-1543	SIAI
Fax Number: (574) 970-1515	2
Email Address: david@childsupportrecovery.com	
4. The Registered Agent's information is as follows:	
Name: C T Corporation System	
Address: (Must be a physical address, PO BOXES are not acceptable): 1201 Peachtree Street, NE	
Atlanta, GA 30361	
Phone Number: (312) 345-4320	
Email Address: info@ctadvantage.com	

5.	Is the applicant a registered domestic corporation, Limited Liability Company or Partnership [or a foreign entity with a valid Certificate of Authority] with the Office of Secretary of State in Georgia? X Yes No	
	If yes, please provide your company's control num. If no, please identify your company's legal structu	
6.	Surety Bond Information: The company has secured a surety bond in the amXYesNo	ount of no less than \$50,000.00.
	If yes, you must provide surety bond documentations surety bond must satisfy the following conditions. 393.9, the surety bond must be issued by a surety state. The surety bond must be issued in favor of the state damaged by a violation of O.C.G.A. § 10-1-393.9, and conditioned on the private child support collector's conditional on the private child support collector's conditional or the private child support collector's agreement with its client.	Pursuant to O.C.G.A. 10-1- authorized to do business in this tate for the benefit of a person that the Surety Bond is mpliance with O.C.G.A. 10-1-
	If no, you must include a \$50,000.00 check, cashic payable to the Secretary of State with this applica	•
7.	By submitting this application, the applicant agree state laws and regulations, with O.C.G.A. 10-1-13 performance of the obligations under the private cagreements with it clients.	9.9-10 and the faithful
	Submitted this 16TH day of October in the	year <u>2009</u> .
Sworn 26	and subscribed before me, this day of <u>COLOBER</u> in the year <u>2009</u> .	Signature of Officer/ General Partner
	y Public Tamra L. Garber ommission expires	David Conder, President Type or Print Name and Title
Sep	tember 18,2013	PO Box 547 Elkhart, IN 46515 Address
25 X		(574) 296-1543 Telephone

GAPCSCA 001 Application

#### LICENSE OR PERMIT BOND

#### KNOW ALL BY THESE PRESENTS:

That we, <u>CHILD SUPPORT RECOVERY SERVICE, INC.</u>, of <u>Elkhart, IN</u> as Principal(s) and INTERNATIONAL FIDELITY INSURANCE COMPANY of Newark, NJ, a corporation authorized to transact surety business in the State of Georgia, as Surety, are held and firmly bound unto the <u>STATE OF GEORGIA</u>, as Obligee, for the benefit of a person damaged by a violation of O.C.G.A.10-1-393.9 in the penal sum not to exceed <u>FIFTY THOUSAND</u> and no/100 (\$50,000.00) DOLLARS, lawful money of the United States of America, for the payment of which, well and truly to be made, we bind ourselves, our heirs, legal representatives, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, Principal has applied to the Obligee for a license or permit to do business as COLLECTION AGENCY.

THE BOND is conditioned on the private child support collector's compliance with O.C.G.A.10-1-393.9 and O.C.G.A.10-1-393.10 and the faithful performance of its obligations under the private child support collector's agreement with its client.

The Surety may cancel this bond provided that the Surety shall provide thirty (30) days' prior written notice of the cancellation of this bond to the Principal and to the State of Georgia. Such notice shall be by registered or certified mail with request for a return receipt.

In no event shall the liability of the Surety under this bond and all claims against the bond exceed the face amount of this bond.

SIGNED AND SEALED this 17th day of NOVEMBER, 2009.

CHILD SUPPORT RECOVERY SERVICE, INC.

David Conder, President

Principal

INTERNATIONAL FIDELITY INSURANCE COMPANY

CATHERINE C. KEHOE, Attorney-In-Fact

Tel (973) 624-7200

## POWER OF ATTORNEY INTERNATIONAL FIDELITY INSURANCE COMPANY

HOME OFFICE: ONE NEWARK CENTER, 20TH FLOOR NEWARK, NEW JERSEY 07102-5207

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing laws of the State of New Jersey, and having its principal office in the City of Newark, New Jersey, does hereby constitute and appoint

CONWAY C. MARSHALL, ELIZABETH K. WRIGHT, CLARK P. FITZ-HUGH, DARLENE A. BORNT, CATHERINE C. KEHOE, KRISTINE K. SELLERS, R. TUCKER FITZ-HUGH, ELIZABETH GARRISON, LINDA A. BOURGEOIS

New Orleans, LA.

its true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, stature, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said INTERNATIONAL FIDELITY INSURANCE COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at its principal office.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of Article 3-Section 3, of the By-Laws adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting called and held on the 7th day of February, 1974.

The President or any Vice President, Executive Vice President, Secretary or Assistant Secretary, shall have power and authority

- (1) To appoint Attorneys-in-fact, and to authorize them to execute on behalf of the Company, and attach the Seal of the Company thereto, bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof and,
- (2) To remove, at any time, any such attorney-in-fact and revoke the authority given.

Further, this Power of Attorney is signed and sealed by facsimile pursuant to resolution of the Board of Directors of said Company adopted at a meeting duly called and held on the 29th day of April, 1982 of which the following is a true excerpt:

Now therefore the signatures of such officers and the seal of the Company may be affixed to any such power of attorney or any certificate relating thereto by facsimile, and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the Company in the future with respect to any bond or undertaking to which it is attached.

IN TESTIMONY WHEREOF, INTERNATIONAL FIDELITY INSURANCE COMPANY has caused this instrument to be signed and its corporate seal to be affixed by its authorized officer, this 16th day of October, A.D. 2007.

INTERNATIONAL FIDELITY INSURANCE COMPANY

STATE OF NEW JERSEY County of Essex

I from a. Tom

Secretary

On this 16th day of October 2007, before me came the individual who executed the preceding instrument, to me personally known, and, being by me duly sworn, said the he is the therein described and authorized officer of the INTERNATIONAL FIDELITY INSURANCE COMPANY; that the seal affixed to said instrument is the Corporate Seal of said Company; that the said Corporate Seal and his signature were duly affixed by order of the Board of Directors of said Company.



IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.

A NOTARY PUBLIC OF NEW JERSEY My Commission Expires Nov. 21, 2010

aria H. Graned

CERTIFICATION

I, the undersigned officer of INTERNATIONAL FIDELITY INSURANCE COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Section of the By-Laws of said Company as set forth in said Power of Attorney, with the ORIGINALS ON IN THE HOME OFFICE OF SAID COMPANY, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect

IN TESTIMONY WHEREOF, I have hereunto set my hand this

day of Noverber Zax

Assistant Secretary